CATENT APPLICATION FEE DETERMINATION RECORD									Application or Doctor Number 10/03/7/12/4					
CLAIMS AS FILED - PART I (Column 1) (Column 2)									LE		OR	OTHER		
TOTAL CLAIMS				19			PATE		FEE	1	RATE	FEE		
FOR				HUNDE	RFLED	HEARE	HAMEEN EXTRA		BASIC PEE 370.00		OR	ALDC FEE	740.00	
TOTAL CHARGEABLE CLAIMS				19 m	19 minus 20=		• •		X\$ 9=		OR.	X\$18=		
INDEPENDENT CLAIMS				4 0	4 minus 3 =				X42=		OR	XB4=	84	
W	1191E 0878	DEN	TOLAN	PRESENT				-14	0=		OR	+280a	-	
• If the difference in column 1 is less than zero, order *0" in column 2							TOT	AL		OR	TOTAL			
CLAINS AS AMENDED - PART (I											OTKER			
			obumn 1)			mn 2)	(Column 3)	SM		DITTY	OR.	SMALL		
AMENDMENTA		æ	EMPHER AFTER ENGLIENT		PREVI	STÉRI OUSLY FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		ANTS	ADDI- TIONAL FEE	
NO.	Total	•	19	Minus	- 1	9	•	XS	>		OR	X\$18=		
	Independent	•	3	Mirrus	+44	4	·	X42			OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								*		OR	+280=		
									TOL			YOYAL		
			dum 1		(Cob)	m 2)	(Column 3)	ADOIT,	FEE	<u> </u>	ОЯ	ADOIT, FEE		
	CLAUS		-	HIGHEST					ADOI-			ADDI-		
	AST		emadonis APTER		NUMBER PREVIOUSLY		PRESENT	RA	E	TIONAL		RATE	TIONAL	
		AM	ERDMENT		PAID	FDR CU		_		FEE			FEE	
HENDMENT B	Total	<u>:</u>	ĨĨ	Minus	-	77	ļ 	XS)-		QЯ	X\$18•		
E	Independent	IRST PRESENTATION OF M		Minus Autopus Or				X42	•		OR	X84*	•	
TOTAL TRESERVATION OF WIDERY EAST CHARACTER COMM								+14	*		OR	+280=		
			•					ADDIT	A		OR	YOYAL AOOIT, FEE		
		C	olumn 1)		. (Colu	m 2)	(Cotumn 3)	AJUIL.				AUGI.FCE		
			CLUUS		HIGHEST					ADDI-			ADDI-	
AMENDMENT C		REMAINING AFTER AMENDMENT			PREVI		PRESENT EXTRA	RAT	E	TIONAL FEE		RATE	TIONAL	
1	Total	·	O	Mina	1	_0	.7	XS	>		CR	X\$18=		
SAN E	Independent	·	4	Alimas		4	0	X42	,		CR	X84•		
ت	FIRST PRESI	ATA	TION OF	MUCTIPLE D	EPENDEN	TOLASK		•14			-	+280a		
											OR	YOYAL		
-	I the Tiptest No	mber	Previously	Pols For IN T	HOS SPACE	is less 🖘	20, erner '20."	ADDIT			OR	ADDIT. FEE		
	The Tighest No						M 3, CHW 7."							

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